

Christina Giacobbe Director of Emergency Communications and 911

Cambridge Emergency Communications Department

125 Sixth Street, Cambridge MA 02142

Phone: (617) 349-6911 Fax: (617) 349-6918 www.cambridge911.org



Louis A. DePasquale
City Manager

CODERED REGISTRATION FORM

I am aware that the City of Cambridge has subscribed to an alert system known as CodeRED. The City of Cambridge may use the alert system to communicate with the public in cases where prompt notice to protect life, health or property is advantageous.

Please provide the information below and mail to the Emergency Communications

Department or fax to 617-349-6918

Name:			
Address:			
Telephone nu	mber(s) to be placed in	the Emergency Noti	fication System:
Cell phone pi	ovider (if applicable):_		
Email addres	s(s) to be placed on the	Emergency Notificat	ion System:
Names of oth	ers residing at the abov	e address:	
 Signature		Date	